



General Assembly

February Session, 2002

Amendment

LCO No. 2947

SB0021802947SD0

Offered by:
SEN. HARP, 10th Dist.

To: Senate Bill No. 218

File No. 47

Cal. No. 75

***"AN ACT REQUIRING THE TESTING OF INMATES FOR
TUBERCULOSIS."***

1 Strike lines 9 to 14, inclusive, in their entirety and insert the
2 following in lieu thereof:

3 "(b) Any person who has been committed to the custody of the
4 Commissioner of Correction and remains in custody for a period of at
5 least five consecutive days shall be tested to determine if such person
6 has active tuberculosis or latent tuberculosis infection. Any person
7 testing positive for active or infectious tuberculosis shall be subject to
8 the provisions of sections 19a-255, 19a-256 and 19a-262 to 19a-265,
9 inclusive, of the general statutes. Any person testing positive for latent
10 tuberculosis infection shall be first medically evaluated for infectious
11 tuberculosis and then offered treatment for latent tuberculosis
12 infection as recommended at the time by the National Centers for
13 Disease Control and Prevention.

14 Sec. 2. (NEW) (*Effective October 1, 2002*) In facilities operated by the

15 Department of Correction, the medical director, contractor and chief
16 administrator of the facility shall ensure that: (1) Each incarcerated
17 inmate, upon incarceration, has a tuberculin skin test, unless already
18 known to be positive, a symptom evaluation and if indicated according
19 to the most recent recommendations from the National Centers for
20 Disease Control and Prevention, a chest radiograph for tuberculosis;
21 (2) each incarcerated inmate has an evaluation for active or infectious
22 tuberculosis whenever a cough lasting more than two weeks develops;
23 (3) each incarcerated inmate has at least an annual tuberculin skin test,
24 unless already known to be positive; and (4) information on the results
25 of testing for infectious tuberculosis and latent tuberculosis infection as
26 described in subdivisions (1) to (3), inclusive, of this section and all
27 efforts to treat each inmate for active tuberculosis or latent tuberculosis
28 infection and discharges of inmates who have not completed therapy
29 for tuberculosis or latent tuberculosis infection are reported promptly
30 to the central Department of Correction tuberculosis registry.

31 Sec. 3. (NEW) (*Effective October 1, 2002*) (a) The Department of
32 Correction shall establish a tuberculosis infection control committee.
33 Said committee shall include, but not be limited to, the following
34 members: (1) The Commissioner of Correction or said commissioner's
35 designee; (2) the medical director for the Department of Correction; (3)
36 a medical contractor or consultant currently executing any tuberculosis
37 control contract with the Department of Correction. Said committee
38 may consult with the Commissioner of Public Health or said
39 commissioner's designee.

40 (b) The committee established pursuant to subsection (a) of this
41 section shall develop guidelines and protocols for the purpose of
42 implementing section 2 of this act. Said guidelines shall include, but
43 not be limited to, the following tuberculosis infection control activities:
44 (1) Screening of inmates; (2) containment; and (3) assessment of
45 guidelines implementation. Any guidelines established shall be
46 consistent with the most recent recommendations from the National
47 Centers for Disease Control and Prevention.

48 Sec. 4. (NEW) (*Effective October 1, 2002*) (a) Any inmate found to
49 have evidence of infectious tuberculosis shall be isolated from any
50 public contact until such time as the inmate has received treatment and
51 has been evaluated and found to be free of infection.

52 (b) If an inmate found to have infectious tuberculosis is believed,
53 based on subsequent investigation, to have exposed visitors or
54 employees to tuberculosis, efforts shall be made to inform such
55 persons and encourage such persons to have an evaluation for
56 tuberculosis infection.

57 Sec. 5. (NEW) (*Effective October 1, 2002*) The Department of
58 Correction may enter into a contract agreement with an appropriate
59 health care provider to manage the responsibilities as it relates to
60 testing, screening or treatment of inmates for tuberculosis."